



Bureau of Alcoholic Beverages
Division of Liquor Licensing & Enforcement
164 State House Station
Augusta, ME 04330-0164
Tel: (207) 624-7220 Fax: (207) 387-3424

**APPLICATION FOR CATERED FUNCTION BY
QUALIFIED CATERING ORGANIZATION**

License No.: _____ Name of Qualified Caterer: _____

Mailing Address: _____

Town/ City: _____ State: _____ Zip Code: _____

Telephone: _____ Fax: _____

Title and Purpose of Event: _____

Location of Event: _____

Physical Address of Event: _____

Town/City: _____ State: _____ Zip Code: _____

☐ Indoor Event ☐ Outside Event **(IF OUTSIDE AREA, DIAGRAM MUST BE INCLUDED)**

Describe specific indoor and/or outdoor area to be licensed: _____

Date of Event: _____ Time – From: _____ To: _____

Number of Persons Attending: _____

Name of Sponsor: _____

Address: _____ Town/City: _____

State: _____ Zip Code: _____ Telephone Number: _____

Signature of Licensee or Corporate Officer

Date

Print Name of Licensee or Corporate Officer

FOR USE ONLY BY DIVISION OF LIQUOR LICENSING & ENFORCEMENT

RESTRICTIONS:

[] **APPROVED**

DATED: _____

[] **NOT APPROVED**

ISSUED BY: _____

NOTE:

TO MUNICIPAL OFFICERS & COUNTY COMMISSIONERS:

This application must be approved by the Municipal Officers of the municipality in which the function is to be held or, if held in an unincorporated place, by the County Commissioner. Title 28A, Section 1076, Subsection 7D grant authority for this approval without public notice.

Dated at: _____, Maine _____ ss
City/Town (County)

On: _____
Date

The undersigned being: ☐ Municipal Offices ☐ County Commissioners of the

☐ City ☐ Town ☐ Plantation ☐ Unincorporated Place of: _____,
Maine

Hereby certify that we have given public notice on this application and held public hearing thereon as required by Section 653 Title 28A, Maine Revised Statutes and herby approve said application.

Signature	Print

***72 Hours in Advance of Said Event or Gathering
REQUESTED***